BEST AVAILABLE COPY

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999									9	154	88	49	
CLAIMS AS FILED - PART í (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY	
FC	PR	NUMBE	NUMBER FILED			NUMBER EXTRA			E	FEE	1	RATE	FEE
ВА	SIC FEE								_	345.00	OR		690.00
то	TAL CLAIMS		/ (2 minus 20=			*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	3 minus 3 =			•			X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT							ŀ	+130	·		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTA			OR	TOTAL	690
CLAIMS AS AMENDED - PART II									`-	<u> </u>	JON	OTHER	
(Column 1) (Column 2) (Column 3)								SMALL ENTITY			OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	HEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	· /B	Minus	ے **	X	=		X\$ 9	=		OR	X\$18=]
AME	Independent	• 3	Minus	***	3	. =		X39=	=		OR	X78=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	NT CLAIM		Ì	. 120				+260=	0//
							L	+130			OR	TOTAL	(2012)
							A	DDIT. F			OR	ADDIT. FEE	070,00
	4°	(Column 1) CLAIMS	1		umn 2) HEST	(Column 3)	F		_	4001	!		1001
MENT B		REMAINING AFTER AMENDMENT		PREV	MBER /IOUSLY D FOR	PRESENT EXTRA		RATI	Ę	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ı	X\$ 9	=		OR	X\$18=	
AMEND	Independent	•	Minus	***		=	ľ	X39=	=		OR	X78=	
È	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+260=	
									ΓAL			TOTAL	
(Column 1) (Column 2) (Column 3)									EE			ADDIT. FEE	
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NU PREV	MHEST MBER MOUSLY D FOR	PRESENT EXTRA	ſ	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MOM	Total	*	Minus	**		=		X\$ 9:	=		OR	X\$18=	
AMENDMENT	Independent	*	Minus	***		=	t	X39=	╗			X78=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-		OR		
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2 wr	ite "0" in co	olumn 3.	L	+130			OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												ADDIT. FEE	